



#### General

#### Title

Metabolism and nutrition: percentage of patients with enteral nutrition (EN) correctly monitored.

## Source(s)

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Measure Domain

## Primary Measure Domain

Clinical Quality Measures: Process

# Secondary Measure Domain

Does not apply to this measure

# **Brief Abstract**

# Description

This measure is used to assess the percentage of patients with enteral nutrition (EN) correctly monitored.

#### Rationale

The aim of intensive care medicine is to provide critical patients with the healthcare that they need, ensuring the quality and safety of care. Intensive care medicine is one of the principal components of modern healthcare systems. There is an increasing demand for this resource, which involves high costs.

The quality of care has gradually come to be the central focus of healthcare, and in recent years patient safety has come to represent one of the key aspects of quality. In the case of intensive care medicine, this interest in quality is even more evident, not only because of its social and economic impact, but also because some of the dimensions involved in the quality of care of critical patients take on greater importance: critical patients are more vulnerable, access to critical care is more limited so efforts to distribute resources equitably are more important, scant scientific evidence is available, and the efficiency is limited.

Tolerance to enteral nutrition (EN) enables the goals for caloric intake to be reached effectively. It is important to identify the presence of factors

that can act as potential barriers to the tolerance of EN so that they can be corrected. The appropriate knowledge, definition, and management of the complications that can occur during EN are also important.

#### Evidence for Rationale

Kreymann KG, Berger MM, Deutz NE, Hiesmayr M, Jolliet P, Kazandjiev G, Nitenberg G, van den Berghe G, Wernerman J, DGEM (German Society for Nutritional Medicine), Ebner C, Hartl W, Heymann C, Spies C, ESPEN (European Society for Parenteral and Enteral Nutrition). ESPEN Guidelines on Enteral Nutrition: Intensive care. Clin Nutr. 2006 Apr;25(2):210-23. [70 references] PubMed

McClave SA, Martindale RG, Vanek VW, McCarthy M, Roberts P, Taylor B, Ochoa JB, Napolitano L, Cresci G, A.S.P.E.N. Board of Directors, American College of Critical Care Medicine, Society of Critical Care Medicine. Guidelines for the Provision and Assessment of Nutrition Support Therapy in the Adult Critically Ill Patient: Society of Critical Care Medicine (SCCM) and American Society for Parenteral and Enteral Nutrition (A.S.P.E.N.). JPEN J Parenter Enteral Nutr. 2009 May-Jun;33(3):277-316. PubMed

Ortiz Leyba C, Montejo Gonzalez JC, Jimenez Jimenez FJ, Lopez Martinez J, Garcia de Lorenzo y Mateos A, Grau Carmona T, Acosta Escribano J, Mesejo Arizmendi A, Fernandez Ortega F, Ordonez Gonzalez FJ, Bonet Saris A, Blesa Malpica A, Grupo de Trabajo de Metabolismo y Nutricion de la SEMICYUC. [Recommendations for nutritional assessment and specialized nutritional support of critically ill patients]. Nutr Hosp. 2005 Jun;20 Suppl 2:1-3. PubMed

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## **Primary Health Components**

Metabolism; enteral nutrition (EN); monitoring

# Denominator Description

Number of patients admitted with enteral nutrition (EN) (see the related "Denominator Inclusions/Exclusions" field)

# Numerator Description

Number of patients with enteral nutrition (EN) correctly monitored (see the related "Numerator Inclusions/Exclusions" field)

# **Evidence Supporting the Measure**

# Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

# Additional Information Supporting Need for the Measure

Unspecified

# Current Use not defined yet Application of the Measure in its Current Use Measurement Setting Hospital Inpatient Intensive Care Units Professionals Involved in Delivery of Health Services not defined yet Least Aggregated Level of Services Delivery Addressed Single Health Care Delivery or Public Health Organizations Statement of Acceptable Minimum Sample Size Unspecified Target Population Age Age greater than or equal to 18 years Target Population Gender Either male or female National Strategy for Quality Improvement in Health Care National Quality Strategy Aim

Extent of Measure Testing

State of Use of the Measure

Unspecified

State of Use

Current routine use

## National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

# Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need	

Getting Better

#### **IOM Domain**

Effectiveness

# Data Collection for the Measure

## Case Finding Period

Unspecified

# **Denominator Sampling Frame**

Patients associated with provider

## Denominator (Index) Event or Characteristic

Institutionalization

Therapeutic Intervention

#### **Denominator Time Window**

not defined yet

#### Denominator Inclusions/Exclusions

Inclusions

Number of patients admitted with enteral nutrition (EN)

Population: All patients who receive EN during the intensive care unit (ICU) stay during the period reviewed.

Exclusions

Unspecified

# Exclusions/Exceptions

not defined yet

#### Numerator Inclusions/Exclusions

#### Inclusions

Number of patients with enteral nutrition (EN) correctly monitored

Note: Monitoring EN must include all of the following:

- · Checking the amount administered in 24 hours
- Checking the position of the feeding tube
- Checking the patient's position: semiseated (30° to 45°)
- Identification and management of the gastrointestinal complications of EN: increased volume of gastric residue, constipation, EN-associated diarrhea, vomiting regurgitation, abdominal distension, bronchoaspiration of the diet
- · Blood glucose control according to the critical care department's protocol
- Serum electrolytes/24 hours
- Trigly cerides, cholesterol, protein electrophoresis/7 days

#### **Exclusions**

Unspecified

## Numerator Search Strategy

Institutionalization

#### **Data Source**

Electronic health/medical record

Paper medical record

# Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

# Computation of the Measure

# Measure Specifies Disaggregation

Does not apply to this measure

# Scoring

Rate/Proportion

# Interpretation of Score

## Allowance for Patient or Population Factors

not defined yet

# Standard of Comparison

not defined yet

# Prescriptive Standard

Standard: 100%

# **Evidence for Prescriptive Standard**

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# **Identifying Information**

# Original Title

Monitoring enteral nutrition.

#### Measure Collection Name

Quality Indicators in Critically Ill Patients

#### Measure Set Name

Metabolism and Nutrition

#### Submitter

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

## Developer

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

# Funding Source(s)

Boehringer Laboratories

# Composition of the Group that Developed the Measure

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# Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

#### Adaptation

This measure was not adapted from another source.

## Date of Most Current Version in NQMC

2011 Mar

#### Measure Maintenance

Unspecified

# Date of Next Anticipated Revision

2016 Jul

#### Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in May 2016.

#### Measure Availability

Source available in English		and Spanish	from the Spanish Society of Intensive and Critical Care				
and Units Coronary (SEM)	(CYUC) Web site.						
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#### **NQMC Status**

This NQMC summary was completed by ECRI Institute on January 6, 2014. The information was verified by the measure developer on February 26, 2014.

The information was reaffirmed by the measure developer on May 10, 2016.

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## **Production**

## Source(s)

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# Disclaimer

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